

RYTON URBAN DISTRICT COUNCIL.

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE

YEAR ENDING 31st DECEMBER, 1909.

Gateshead-on-Tyne :

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1910.



Medical Officer's Annual Report for 1909.

RYTON-ON-TYNE,

February, 1910.

*To the Chairman and Members of the
Ryton Urban District Council.*

GENTLEMEN.

I beg to submit to you my Annual Report for the year 1909.

POPULATION.—The estimate of the population at the end of June is 11,890. As during the year 100 new houses have been occupied, and as the number of births over deaths is over 300, this estimate is probably under rather than over the mark, as it is only 440 above the estimate for the previous year.

BIRTHS.—The number of births registered was 450, consisting of 241 males and 209 females, and representing an annual birth rate of 37.84 per 1,000. This is a considerable increase over the year 1908, when the number of births was 412 and the birth rate 35.98, and practically the same as for the year 1902, which was the highest on record. The birth rate for the County is 35.5, which, lower than for 1908 at 37, is practically the same as the mean rate for 10 years at 35.4. The rate for the whole of England and Wales is 25.6, which again shows a reduction over 1908 from 26.5. It is satisfactory, therefore, to find that not only is our birth rate much higher than that for the Kingdom, and higher than that for the County, but that it is considerably higher than our own average for 10 years at 34.23.

Of the total births, 24 were illegitimate, consisting of 13 males and 11 females, contrasting very unfavourably with the number of illegitimate births for the two previous years at 10 for each year.

DEATHS.—The number of deaths registered was 143, consisting of 74 males and 69 females, and corresponding to an annual death

rate of 12.06 per 1,000. This is lower than the rate for the year 1908 at 12.40, which was the lowest on record, though only slightly less than 1907 at 12.50, and than 1906 at 12.42. The death rate for the last five years is therefore very steady, the average being 12.34. The death rate for the County is 15.7, for 1908 17.5, and the 10 years' average 17.9. The rate for England and Wales is 14.5. Therefore we are not only lower than the rate for the whole Kingdom, but much lower than the County rate. Two deaths of residents, however, occurred in institutions outside the District, one at the Conjoint Hospital and one at the Union Workhouse, which brings the total deaths of residents to 145, and the rate to 12.1. As, however, among the deaths registered in the District 3 did not belong to it, of whom one only lived three days, one a fortnight, and one was that of an unknown person found drowned on the foreshore of the river, therefore the actual number of deaths belonging to the District is reduced to 142, and the death rate to 11.98.

The ages at which death occurred are shown in Table IV. at the end of this Report, and may be summarised as follows :—

Under 1 yr.	1—5	5—15	15—25	25—65	Over 65	Total
48	18	4	6	41	28	145

This shows that one-third of the total number of deaths occurred under one year, nearly half under five years, and about one-fifth over 65 : much the same proportion as for previous years.

INFANTILE MORTALITY.—The number of children dying under 1 year of age being 48, and the number of births 450, the infantile mortality rate is 106.6 per 1,000 births. This is a considerable improvement over 1908, when it was 114, over 1907 at 125.35, and over the 10 years average of 140.5. There has, indeed, been a steady decline since the year 1905. The same decline in the infantile death rate has been going on in the County, the 10 years average for which was 159, while that for 1908 was 151, and for 1909 only 124. The rate for the whole of England and Wales is only 109, and even in the 76 large towns only 118, so that the improvement is general. It is not only satisfactory, therefore, that our District participates in this general reduction of infant

mortality in the County and the Kingdom, but that it is so much appreciably lower than the average.

The chief causes of infantile death may be summarised from Table V., in which they are stated in detail :—

Premature Births.....	16	}	22
Congenital Defects	6		
Diarrhœa	6	}	12
Atrophy Marasmus	6		
Whooping Cough	1.....		1
Tubercular Diseases.....	1.....		1
Bronchitis	3.....		3
Convulsions	3.....		3
Other Causes.....	6.....		6
	—		—
	48		48

The most noticeable feature in the above Table is the large number of deaths due to Prematurity of Birth and Congenital Defects, representing 45.7 per cent. of the total number, nearly double that for any year of which I have a record, the numbers for previous years being 12, 10, 13, and 7. It is difficult to account for the increased number of deaths due to these causes, and more difficult to prevent them, although, as I have mentioned in previous Reports, their prevention may be effected by the prohibition of too early marriage, the abstention from vice, drunkenness, and general immorality on the part of parents, the better care of the pregnant mother, better housing and sanitary arrangements, and a generally healthier environment.

No doubt some of the cases put down to Atrophy Marasmus are congenital, and to be explained in the same way as the above, for 3 of them died within a week of their birth, and of the other 3, 2 died at the age of 1 month and 1 of 3 months. They were evidently born with so little vitality as to succumb readily, and practically never had a chance to survive.

ZYMOTIC DISEASE.—The following Table shows the deaths from Zymotic Diseases for the year, and for the two preceding years:—

	1909	1908	1907
Measles	1	0	7
Scarlet Fever.....	0	2	1
Diphtheria	2	4	4
Whooping Cough ...	1	9	2
Enteric Fever	1	0	1
Diarrhœa	6	11	6
<hr/>			
Total	11	26	21

The Zymotic Death rate 0.92 is, therefore, much lower than for the two previous years—2.7 and 1.94, very much lower than that for the County, 1.61 for 1909, 2.70 for 1908, and 2.27 the average of 10 years, and also lower than the rate for the whole of England and Wales at 1.12.

MEASLES, though epidemic in the early months of the year, only caused 1 death. A few cases occurred at Crookhill School, whereupon the Infant Department of the School was closed for three weeks, to the complete prevention of an epidemic of the disease. On the other hand, at Clara Vale School the disease got such a hold that it was deemed hopeless to stop it by closing the School, and the epidemic exhausted itself in a few weeks. Considering the large number of cases, the mortality, which corresponds to a Measles rate of 0.08, is very low—lower than the County rate of 0.37, which is very close to the rate for England and Wales at 0.35. Though School closure has not been found by experience of the past to be very effective in preventing an epidemic of Measles, I am of opinion that, if carried out at once on the occurrence of the first few cases, closure of the Infants' Department would probably be successful, but as the School closure has not been usually effected until the epidemic was in full swing, it has been practically useless.

SCARLET FEVER has not caused any mortality during the year, though 70 cases of the disease were notified. The Scarlet Fever rate was, therefore, nil, while the County rate was 0.09, and that for England and Wales also 0.09.

DIPHTHERIA caused 2 deaths, exactly half the number for each of the two preceding years, and representing a rate of 0.16, a

trifle lower than that for the County at 0.17, and higher than for England and Wales at 0.14. As however, 38 cases were notified, the mortality works out at 5.2 per cent., in very marked contrast to the not very far distant past, when a mortality of 20, 30, or 40 per cent. was not uncommon. This great diminution is undoubtedly due to the use of Antitoxin, which is now general throughout the District. The two fatal cases were case of Laryngeal Diphtheria (Diphtheritic Croup) and the patients were dead in a few hours, and before there was time for Antitoxin treatment to have any effect. I am convinced that if every case was seen early and treated on its first appearance, there would scarcely ever be a fatality, but the disease is sometimes so painless and so insidious in its onset that parents are not alive to the serious nature of their child's illness till days have elapsed and the disease has got a thorough hold.

WHOOPING COUGH, though never entirely absent during the whole year, and chiefly prevalent at Greenside, only caused one death. The rate is, therefore, 0.08, that for the County 0.25, and the average for 10 years 0.36, while that for England and Wales is 0.20. The disease is chiefly spread by School children going to School, while still in the infective stage, partly because its infectious character is not generally recognised, and partly because of the insistence by School Board officers, who are anxious to keep up the attendance at any cost.

ENTERIC FEVER caused 1 fatality, which took place at the Conjoint Hospital. The Enteric Fever rate is therefore 0.08, that for the County 0.12, that for England and Wales 0.06.

DIARRHŒA was, as usual, the chief cause of the Zymotic mortality, and caused 6 deaths, the same as for 1907, and little more than half for 1908. The Diarrhœa death rate was therefore 0.48, lower than the County rate of 0.59, though higher than the rate for England and Wales at 0.28. As the County rate for 1908 was 1.44, and the 10 years average 0.93, the rate for the past year is much below the average. This is in accordance with the experience of the past, which has shown in cold, wet, and damp seasons a low, and in hot, dry seasons, with their usual concomitant of an epidemic of flies, a high Diarrhœa mortality.

After the Infantile and Infectious Diseases, the most important causes of death are :—

The Acute Respiratory Diseases.....	15
Phthisis	7
Other Tubercular Diseases	11
Cancer.....	4
Heart Diseases	14

The number of DEATHS FROM ACUTE RESPIRATORY DISEASES, consisting of Bronchitis and Pneumonia, 15, represents an Acute Respiratory death rate of 1.20, slightly higher than for 1908 with 13 deaths and a rate of 1.13. This, however, is considerably lower than the County rate of 2.38 for 1909, 2.8 for 1908, and the ten years average of 3.03.

THE NUMBER OF DEATHS FROM PHTHISIS, 7, is in excess of 1908 and 1907, with each 5 deaths, though lower than 1906 with 9, and 1905 with 8. The Phthisis death rate is therefore 0.56, less than the County rate of 0.91 for 1909, of 0.95 for 1908, and 1.07 for the ten years average. It is somewhat disappointing that the death rate from Phthisis, though below the County, is not lower still than it is, and higher than for the 2 preceding years. For greater care is being taken to prevent dissemination of the disease by the avoidance of expectoration, the better instructing of the public in the nature of the disease, and in the necessity for the better ventilation of the rooms both of the sick and the healthy, and the abundant entrance of fresh air. I would suggest that still further to aid in the prevention and treatment of Phthisis, the disease should be made a notifiable one, that leaflets of instructions as to its nature and treatment should be issued to the patient, and that portable flasks for expectoration should be supplied, with instructions for destruction of the expectoration and disinfection of the spittoon.

OTHER TUBERCULAR DISEASES, such as General Tuberculosis, Tubercular Meningitis, and Tubercular Peritonitis, caused 11 deaths, as against 8 in 1908, 6 in 1907, and 9 in 1906. This represents a death rate of 0.88, slightly higher than the County rate of 0.73, and nearly the same as the 10 years County average, 0.84.

Adding the deaths from Phthisis to those from other Tubercular Diseases, we get a total of 18 deaths from Tuberculosis, which, in 145 deaths, the total number for the year from all causes, gives 12.4 per cent. This is somewhat higher than that shown in the Registrar General's Report for 1908, in which 10 per cent. of the deaths from all causes was due to Tuberculosis in some form.

CANCER, on the other hand, (which was shown in the same Report to be responsible for 6.3 per cent. of deaths from all causes), causing 4 deaths, and a rate of 0.32, gives a percentage of 2.7 per cent.

HEART DISEASE caused 14 deaths, the largest number for any year of which I have a record, equal to a mortality rate of 1.12, and constituting 9 per cent. of the total number, practically the same as shown in the Registrar General's Report for 1908 already referred to.

NOTIFICATIONS OF INFECTIOUS DISEASE.

The number of cases of Infectious Disease notified during the year was 124, which, curiously enough, is exactly the same as for the previous year. These consisted of :—

Scarlet Fever.....	70 cases.
Diphtheria	38 „
Enteric Fever	8 „
Continued Fever	3 „
Puerperal Fever	1 „
Erysipelas	4 „
—	
Total	124

SCARLET FEVER has been more or less prevalent throughout the whole year, with the exception of the month of August. It has been of very mild type, and there has been no fatality from it. The greatest number of cases occurred in May, 14, in October, 12, and December, 10, which accounts for more than half the number, the remainder being distributed over the other 8 months more or

less equally. The greater number of the cases occurred in the Crawcrook district, 37, the least in the Eastern part of the District (Addison, Runhead, and Stargate) 7, while in the Ryton and Greenside districts there were 13 each. As compared with preceding years, the number of cases in 1908 was 56, in 1907, 40, in 1906, 88; in 1905, 66, and in 1904, 77.

DIPHTHERIA, with 38 cases, was rather less than 1908 with 42, and 1907 with 43. It was never absent during any month of the year, the lowest number of any month being 2, and the highest 5. Nor was any district free from it, for while the greater number, 14, occurred at Crawcrook, 11 occurred at Ryton, 6 at Greenside, and 7 at Addison and Stargate. This distribution of the cases is different from the previous years, for whereas in 1908 and 1907 more than half occurred at Greenside, this year the majority occurred at Crawcrook and Ryton. As showing the manner in which the disease may be spread, a boy was found suffering from Diphtheritic Paralysis who had never been absent from School, and who had some weeks previously suffered from sore throat, which had undoubtedly been an unrecognised Diphtheria of a mild type. During the past year, the majority of the patients have had their throats swabbed and the swabs bacteriologically examined before they were allowed to return to School or work, and as shewing the advisability of that being done, one of the cases had to have four swabs taken at intervals before the result was found to be negative.

As already referred to in another part of this Report, only 2 of the cases were fatal.

ENTERIC FEVER occurred to the number of 8 cases, of which 4 were at Crawcrook, 3 at Greenside, and 1 at Addison. None of these cases appeared to have any connection with each other, except, perhaps, the Greenside cases, which occurred in adjoining houses. All the others were isolated cases, and due to local causes. One case was fatal after removal to the Conjoint Hospital.

The CONTINUED FEVER cases were at Crawcrook 1, and Clara Vale 2, both in one house, and were probably, as most of these cases are, mild Typhoids.

INFLUENZA became prevalent in the early, as in the latter months of the year, though not severe in type. It was fatal in 1 case only, though I am not sure that this represents the total Influenza mortality. For as it is not usually fatal directly, but only by its complications in Pneumonia or Broncho-Pneumonia, the cause of death is apt to be put down to the latter, and the original cause overlooked.

PUERPERAL FEVER, as in the previous year, was fatal in 1 case, but the case was one complicated by other conditions, in which the birth was premature and the child still-born, and the death is scarcely one of Puerperal Fever in the strict sense.

Cases of Infectious Disease sent to the Conjoint Hospital numbered 36, consisting of Scarlet Fever 22, Enteric Fever 6, and Diphtheria 8. This is a slight increase over 1908, when 33 cases were sent, and a great increase over 1907, when only 12 were sent.

BACTERIOLOGICAL EXAMINATIONS :—32 specimens were sent for examination, as against 27 for 1908, and 23 for 1907. These, as in former years, have proved of great advantage in the diagnosis of doubtful cases, and are practically only taken in such cases, and not in cases where the diagnosis can be made out with certainty. It is not, therefore, to be wondered at when the results are as often or more often negative than positive, as in the year under consideration, when the results were positive in 13 and negative in 19 cases. The only cases that have been submitted to bacteriological tests are Diphtheria and Tubercle.

GENERAL SANITATION.

The District has been, as usual, regularly inspected, nuisances abated, and defects remedied. Disinfection of infected houses is now carried out in practically all cases, and disinfectants freely supplied.

THE SUPPLY OF WATER by the Newcastle and Gateshead Water Co. has been satisfactory both as to quantity and quality.

THE SEWERS have been regularly flushed and cleansed, and maintained in efficient condition.

THE ROADS have been maintained in a satisfactory condition and regularly scavenged, and are generally excellent. Northumberland Road, which for several years has been a quagmire in winter and almost impassable, is about to be put in order, but there are still others that require attention, namely, the road to Newburn Bridge, that to Woodside Bank Top, to Low Greenside, and the back street between South Beech Grove Terrace and South View. The footpaths throughout the whole District are excellent, most of them asphalted, and all good.

THE SCAVENGING ARRANGEMENTS have been satisfactorily carried out, and the removal of house refuse has in general been adequately done by the Contractors.

An approximate estimate made by the Surveyor of the number of water closets, ash closets, and ashpit privies in the District showed the following :—

352 water closets for 374 houses.

836 ash closets for 840 houses.

971 ashpit privies for 1,084 houses.

HOUSING.—Plans were approved for 154 new houses, and 100 were occupied during the year. The Council have adopted a series of bye-laws to regulate the erection of tenement houses, and these are now receiving the attention of the Local Government Board.

COWSHEDS and DAIRIES of the District have been regularly supervised, and such defects as were found necessary remedied. But on the whole they were found clean and well kept.

SLAUGHTER HOUSES.—There are 15 Licensed Slaughter Houses in the District, including one at Clara Vale Stores, which is not in use at present. They are all inspected at regular intervals.

There is no special Inspector for the purpose, but the General Inspector is in the habit of visiting the Slaughter Houses before, during, and after slaughtering, and in all his inspections of animals

and of meat exposed for sale he has never seen any even suspicious in quality. The fact is there are no *very* poor people, and very few poor at all, and the inhabitants generally are not only in a position to buy good meat, but insist on the best, and any butcher supplying anything else would immediately lose his custom.

THE NOTIFICATION OF BIRTHS ACT has not been adopted by the Council, and there are no Health Visitors. But there are now two General District Nurses and one Maternity Nurse, who, in the course of their daily work, not only attend upon the sick, but advise and assist mothers in the feeding and bringing up of children and in everything pertaining to their welfare. Largely owing to their influence and assistance, more children are being brought up on the breast, and there is less tendency to resort to the feeding bottle than was the case even a few years ago.

There are no Factories in the District, and no Workshops in the strict sense of the word, but the few rooms where two or three tailors, dressmakers, and shoemakers work, generally attached to shops are clean, well-ventilated, and healthy.

The Council have adopted many of the provisions of the Public Health Acts Amendment Act, 1907.

I have to thank the Surveyor for his valuable assistance and for the Table of work done in his Department, which, with the statistical Tables required by the Local Government Board, I append to this Report.

I am, GENTLEMEN,

Your obedient servant,

JAMES W. SMITH,

Medical Officer of Health.

COUNTY OF DURHAM.

*SUMMARY OF WORK done in the INSPECTOR, OF
NUISANCES' DEPARTMENT during the Year 1909, in
the Urban District of Ryton.*

	Number of Informal Written Notices by Inspector	Number of Formal Notices by order of Authority	Number of Nuisances abated after Notice.	General Remarks.
PUBLIC HEALTH ACTS.				
Dwelling-houses and Schools—				
Structural Defects	5	1	4	{ 8 E.Cs. provided in place of old conveniences
Slaughter-houses	1	...	1	
Ashpits and Privies	45	1	41	
Deposits of Refuse and Manure ...	9	...	9	
Waterclosets	5	...	5	
Defective Yard Paving	14	1	10	
House Drainage	27	2	26	
Water Supply	10	1	4	
Animals Improperly Kept	2	...	1	
Other Nuisances	2	...	2	
TOTALS	120	6	103	
Number of Plans of New Houses approved during the year ...	154			
Number of such Houses occupied during the year	100			
PRECAUTIONS AGAINST IN- FECTIOUS DISEASE.				
Houses disinfected after Infectious Disease	23	{ By Council, in other cases the materials were supplied the houses disinfected by the tenants.		

JOHN P. DALTON,

Inspector of Nuisances.

Year.	Population estimated to middle of each year.	Births.		Total Deaths Registered in the District				Deaths in Public Institu- tions in the District.	Deaths of Non- residents registered in Public Institu- tions in the District.		Deaths of Residents register'd in Public Insti'tns beyond the District.		Net Deaths at all ages belonging to the District.	
		Number.	Rate.*	At all Ages.		Total Deaths in Public Institu- tions in the District	Non- residents register'd in Public Institu- tions in the District		Resident's register'd in Public Insti'tns beyond the District.	Number.	Rate.*			
				Number.	Rate.									
1		3	1	5	Rate per 1000 Births register'd 6	7	8	9	10	11	12	13		
1899..	7922	278	35.09	42	151.01	120	15.14	..	..	..	120	15.11		
1900..	8260	266	32.20	43	161.65	128	15.49	..	..	..	128	15.49		
1901..	8500	272	32.	52	184.19	134	15.75	..	..	3	137	16.1		
1902..	8750	332	37.90	33	99.09	109	12.45	..	..	1	114	12.57		
1903..	9200	313	34.02	47	150.16	142	15.43	..	..	3	145	15.76		
1904	9500	335	35.26	33	116.41	144	15.15	..	..	1	145	15.26		
1905..	10000	322	32.22	55	170.80	157	15.7	..	..	3	160	16.		
1906	10300	362	35.14	48	132.50	128	12.42	..	..	2	130	12.62		
1907..	10800	351	32.57	44	125.35	135	12.50	..	..	6	141	13.05		
1908..	11450	412	35.98	47	114.	142	12.40	..	1	4	147	12.83		
Averages for years 1893-1908	9468.2	324.3	34.23	45	140.5	133.9	14.24	..	1	2.3	136.7	14.48		
1909	11890	450	37.81	48	106.6	143	12.06	..	..	2	145	12.1		

* Rates in Columns 4, 8, and 13 calculated per 1000 of estimated population.

NOTE.—The deaths to be included in Column 7 of this table are the whole of those registered during the year as having actually occurred within the District or Division. The deaths to be included in Column 12 are the number in Column 7, corrected by the subtraction of the number in Column 10 and the addition of the number in Column 11.

By the term "Non-residents" is meant persons brought into the district on account of sickness or infirmity, and dying in public institutions there; and by the term "residents" is meant persons who have been taken out of the district on account of sickness or infirmity, and have died in public institutions elsewhere.

Total population at all ages 8,448 } At
Number of inhabited houses 1,640 } Census of
Average number of persons per house 5.15 } 1901.

Institutions outside the District receiving sick and infirm persons from the District : Gateshead Union Workhouse, Royal Victoria Infirmary, Newcastle-on-Tyne.

Other Institutions, the deaths in which have been distributed among the several localities in the District : Conjoint Hospital for Infectious Diseases.

Cases of Infectious Disease Notified during the Year 1909.

Notifiable Disease.	Cases Notified in Whole District.								Total cases removed to Hospital.
	At all Ages.	At Ages—Years.							
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.	65 and upwds		
Smallpox .. ..	..	..	..	..	..	..	..	..
Cholera .. ..	..	..	..	..	..	..	..	..
Diphtheria (including Membranous Croup)	38	..	10	19	6	3	..	9	
Erysipelas	4	..	..	..	..	3	1	..
Scarlet Fever, . .	70	..	29	31	9	1	..	19	
Typhus Fever .. ..	..	..	..	..	..	..	..	..
Enteric Fever	8	..	..	1	1	6	..	6
Relapsing Fever .. ..	..	..	..	..	..	..	..	..
Continued Fever . .	3	..	..	2	..	1	..	..
Puerperal Fever	1	..	..	..	..	1	..	..
Plague .. ..	..	..	..	..	..	..	..	..
Totals	124	..	39	53	16	15	1	34	

Isolation Hospital—Conjoint Hospital for Ryton, Blaydon, and Whickham,
Norman's Riding, Winlaton.

Also Conjoint Smallpox Hospital, Greenside, Ryton.

Number of Diseases that can be concurrently treated .. 4.

Causes of, and Ages at, Death during Year 1909.

Causes of Death	Deaths at the subjoined ages of Residents whether occurring in or beyond the District.							Total Deaths whether of Residents or Non-Residents in Public Institutions in the District.
	All ages.	Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.	
Smallpox .. .. .	..	..	..	..	..	..	..	..
Measles	1	..	1	..	..	..	..	..
Scarlet Fever .. .. .	..	..	..	..	..	..	..	..
Whooping Cough	1	1	..	..	..	..	..	..
Diphtheria (including Membranous Croup	2	..	1	1	..	..	..	..
Croup .. .. .	..	..	..	..	..	..	..	..
Fever { Typhus .. .. .	..	..	..	..	..	..	..	..
{ Enteric	1	..	..	..	..	1	..	..
{ Other Continued .. .. .	..	..	..	..	..	..	..	..
Epidemic Influenza	1	..	..	..	..	1	..	..
Cholera .. .. .	..	..	..	..	..	..	..	..
Plague .. .. .	..	..	..	..	..	..	..	..
Diarrhoea	6	6	..	..	..	..	..	..
Enteritis	1	..	..	..	..	..	..	..
Gastritis .. .. .	..	..	..	..	..	..	..	..
Puerperal Fever	1	..	..	..	..	1	..	..
Erysipelas .. .. .	..	..	..	..	..	..	..	..
Phthisis (Pulmonary Tuberculosis)	7	..	..	..	1	5	1	..
Other Tubercular Diseases	11	1	7	..	1	2	..	..
Cancer, Malignant Disease	4	..	..	..	..	3	1	..
Bronchitis	10	3	2	..	..	3	2	..
Pneumonia	5	..	4	..	..	1	..	..
Pleurisy .. .. .	..	..	..	..	..	..	..	..
Other Diseases of Respiratory Organs	3	..	1	..	..	1	1	..
Alcoholism	1	..	..	..	..	1	..	..
Cirrhosis of Liver .. .. .	..	..	..	..	..	..	..	..
Venereal Diseases	1	1	..	..	..	..	..	..
Premature Birth	16	16	..	..	..	..	..	..
Diseases & Accidents of Parturition	1	..	..	..	..	1	..	..
Heart Diseases	14	..	..	1	1	6	6	..
Accidents	5	1	1	..	..	3	..	..
Suicides	1	..	..	..	1	..	..	..
Senility	9	..	..	..	..	..	9	..
Apoplexy	6	..	..	..	..	2	4	..
All other causes	37	19	1	2	2	10	4	..
All causes	145	48	18	4	6	41	28	..

Infantile Mortality during the Year 1909.

Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.		Under 1 Week	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 1 Month	1-2 Months	2-3 Months	3-4 Months	4-5 Months	5-6 Months	6-7 Months	7-8 Months	8-9 Months	9-10 Months	10-11 Months	11-12 Months	Total Deaths under 1 Year
All Causes	Certified Uncertified	21 ..	2 ..	2 ..	1 ..	26 ..	2 ..	3 ..	3 ..	3 ..	1 ..	2 ..	3 ..	..	1 ..	3 ..	1 ..	48
Common Infectious Diseases	Smallpox	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Chickenpox	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Measles	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Scarlet Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diarrheal Diseases	Diphtheria (including Membranous Croup)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Whooping Cough	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Diarrhea, all forms	..	..	..	..	..	..	..	1	..	1	2	1	..	..	2	..	6
	Enteritis, Muco-enteritis, Gastro-enteritis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Wasting Diseases	Gastritis, Gastro-intestinal Catarrh	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Premature Birth	13	1	2	..	16	..	..	..	..	..	..	..	..	..	..	..	16
	Congenital Defects	3	1	..	..	4	..	1	..	..	..	..	..	..	1	..	..	6
	Injury at Birth	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Tuberculous Diseases	Want of Breast-milk, Starvation	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Atrophy, Debility, Marasmus	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Tuberculous Meningitis	3	..	..	..	3	2	..	1	..	..	..	..	..	..	..	..	6
	Tuberculous Peritonitis: Tuberc Mesenterica	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Other Causes.	Other Tuberculous Diseases	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
	Erysipelas	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Syphilis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Rickets	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	1
Other Causes.	Meningitis (not Tuberculous)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Convulsions	1	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..
	Bronchitis	1	..	..	1	2	..	..	..	..	..	..	..	..	..	..	1	3
	Laryngitis	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	3
Other Causes.	Pneumonia	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Suffocation, overlying	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
	Other Causes	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	1
	Other Causes	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2
		21	2	2	1	26	2	3	3	3	1	2	3	..	1	3	1	48

Births in the year—Legitimate, 428; Illegitimate, 22.
Deaths from all Causes at all Ages, 145.

Deaths in the year of—Legitimate Infants, .. ; Illegitimate Infants, ..
Population (estimated to middle of 1909), 11,890.

